

AP9627

Declaration and Power of Attorney for Patent Application Erklärung für Patentanmeldungen mit Vollmacht

German Language Declaration

Als nachstehend benannter Erfinder erkläre ich hiermit an Eides Statt: As a below named inventor, I hereby declare that:

daß mein Wohnsitz, meine Postanschrift und meine Staatsangehörigkeit den im nachstehenden nach meinem Namen aufgeführten Angaben entsprechen, daß ich nach bestem Wissen der ursprüngliche, erste und alleinige Erfinder (falls nachstehend nur ein Name angegeben ist) oder ein ursprünglicher, erster und Miterfinder (falls nachstehend mehrere Namen aufgeführt sind) des Gegenstandes bin, für den dieser Antrag gestellt wird und für den ein Patent für die Erfindung mit folgendem Titel beantragt wird:

My residence, post office address and citizenship are as stated next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

deren Beschreibung hier beigelegt ist, es sei denn (in diesem Falle Zutreffendes bitte ankreuzen), diese Erfindung

wurde angemeldet am
unter der US-Anmeldenummer oder unter der
Internationalen Anmeldenummer im Rahmen des
Vertrags über die Zusammenarbeit auf dem Gebiet
des Patentwesens (PCT).

METHOD FOR PRESSURE MODULATING BRAKE PRESSURES

the specification of which is attached hereto unless the following box is checked:

was filed on 27/April/2000
as United States Application Number or PCT International
Application Number
PCT/EP00/03785

Ich bestätige hiermit, daß ich den Inhalt der oben angegebenen Patentanmeldung, einschließlich der Ansprüche, die durch einen oben erwähnten Zusatzantrag und in einem "preliminary amendment" abgeändert wurden, durchgesehen und verstanden habe.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above and as amended in a preliminary amendment.

Ich erkenne meine Pflicht zur Offenbarung jeglicher Informationen an, die eventuell zur Prüfung der Patentfähigkeit in Einklang mit Titel 37, Code of Federal Regulations, § 1.56 von Belang sind.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56.

[Page 1 of 3]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner of Patents and Trademarks, Washington, DC 20231.

Attorney's Docket No:

PTO/SB/103 (8-96)

g: PATENT/Formal matters/R0129063.DOC

Approved for use through 9/30/98. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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German Language Declaration

Ich beanspruche hiermit ausländische Prioritätsvorteile gemäß Title 35, US-Code, § 119 (a)-(d), bzw. § 365(b) aller unten aufgeführten Auslandsanmeldungen für Patente oder Erfinderurkunden, oder §365(a) aller PCT internationalen Anmeldungen, welche wenigstens ein Land ausser den Vereinigten Staaten von Amerika benennen, und habe nachstehend durch ankreuzen sämtliche Auslandsanmeldungen für Patente bzw. Erfinderurkunden oder PCT internationale Anmeldungen angegeben, deren Anmeldetag dem der Anmeldung, für welche Priorität beansprucht wird, vorangeht.

I hereby claim foreign priority under Title 35, United States Code, §119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Applications
(Frühere ausländische Anmeldungen)

Priority Not Claimed
Priorität nicht beansprucht

19919841.1 ✓ **Germany** ✓

30/April/1999 ✓

Number

Country

Day/Month/Year Filed

Ich beanspruche hiermit Prioritätsvorteile unter Title 35, US-Code, § 119(e) aller US-Hilfsanmeldungen wie unten aufgezählt.

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below.

Application No. , filed on

Application No. , filed on

Ich beanspruche hiermit die mir unter Title 35, US-Code, § 120 zustehenden Vorteile aller unten aufgeführten US-Patentanmeldungen bzw. § 365(c) aller PCT internationalen Anmeldungen, welche die Vereinigten Staaten von Amerika benennen, und erkenne, insofern der Gegenstand eines jeden früheren Anspruchs dieser Patentanmeldung nicht in einer US-Patentanmeldung, bzw. PCT internationalen Anmeldung in in einer gemäß dem ersten Absatz von Title 35, US-Code, § 112 vorgeschriebenen Art und Weise offenbart wurde, meine Pflicht zur Offenbarung jeglicher Informationen an, die zur Prüfung der Patentfähigkeit in Einklang mit Title 37, Code of Federal Regulations, § 1.56 von Belang sind und die im Zeitraum zwischen dem Anmeldetag der früheren Patentanmeldung und dem nationalen oder im Rahmen des Vertrags über die Zusammenarbeit auf dem Gebiet des Patentwesens (PCT) gültigen internationalen Anmeldetags bekannt geworden sind.

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s), or § 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

Application No. , filed on

Status: patented/pending/abandoned

Application No. , filed on

Status: patented/pending/abandoned

Ich erkläre hiermit, daß alle in der vorliegenden Erklärung von mir gemachten Angaben nach bestem Wissen und Gewissen der Wahrheit entsprechen, und ferner daß ich diese eidesstattliche Erklärung in Kenntnis dessen ablege, daß wissentlich und vorsätzlich falsche Angaben oder dergleichen gemäß § 1001, Title 18 des US-Code strafbar sind und mit Geldstrafe und/oder Gefängnis bestraft werden können und daß derartige wissentlich und vorsätzlich falsche Angaben die Rechtswirksamkeit der vorliegenden Patentanmeldung oder eines aufgrund deren erteilten Patentes gefährden können.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Attorney's Docket No:

PTO/SB/103 (8-96)

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German Language Declaration

VERTRETUNGSVOLLMACHT: Als benannter Erfinder beauftrage ich hiermit den (die) nachstehend aufgeführten Patentanwalt (Patentanwälte) und/oder Vertreter mit der Verfolgung der vorliegenden Patentanmeldung sowie mit der Abwicklung aller damit verbundenen Angelegenheiten vor dem US-Patent- und Markenamt:

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Telefon: (248) 594-0650

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

JOSEPH V. COPPOLA, SR. 33373

CUSTOMER NO. 010291

Correspondence Address:

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FIRST NAMED INVENTOR

1-01 **MICHAEL LATARNIK** (deceased-completed on three added page by three joint heirs; Eva-Maria Latarnik, Christine Latarnik, and Sylvia-Monika Latarnik)

N/A

Signature


Date

POST OFFICE ADDRESS AND RESIDENCE

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D-61381 Friedrichsdorf, Germany **DEX**

Citizen of Germany ✓

THIRD NAMED INVENTOR3-00 **MARKUS BENDER**

 11 Feb. 2002
X Signature Date

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SECOND NAMED INVENTOR2-00 **JOCHEN FÜHRER**



Signature

11 Feb. 2002

Date

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Citizen of Germany ✓

FOURTH NAMED INVENTOR4-00 **TOBIAS SCHELLER**



X Signature

11 Feb. 2002

Date

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Citizen of Germany ✓

Practitioner's Docket No. AP9627

**ADDED PAGE TO COMBINED DECLARATION AND POWER OF
ATTORNEY FOR SIGNATURE BY HEIR (37 C.F.R. § 1.42 AND 1.43)**

/ - / / I, Christine Latarnik
(type or print name(s) of administrator(trix), executor(trix) legal representative or all heirs)

hereby declare that I am a citizen of Germany

residing at and having a post office address of Römerstraße 7, D-61381 Friedrichsdorf, Germany DEX

and that I am executing and signing the declaration to which this is attached as

(check one):

- ☐ the administrator(trix) of
- ☐ executor(trix) of the last will and testament of
- ☐ legal representative (or heirs) of
- ☐ heir(s) of
- ☒ one of three joint heirs of

Michael Latarnik

Full name of (first, second etc.) deceased or incapacitated inventor

Germany

Country of citizenship of deceased or incapacitated inventor

Römerstraße 7, D-61381 Friedrichsdorf, Germany

Residence of deceased or incapacitated inventor

Römerstraße 7, D-61381 Friedrichsdorf, Germany

Post Office Address of deceased or incapacitated inventor

NOTE: The name of the first, second etc. deceased or incapacitated inventor should preferably also be filled in at the appropriate prior space of the declaration adding the words "deceased/completed on added page" or "incapacitated-completed on added page."

That, upon information and belief, I aver those facts that the inventor is required to state.

Date: 01.12.2001
Christine Latarnik CHRISTINE LATARNIK ✓
Heir

Date: 01.12.2001
Sylvia Latarnik SYLVIA MONIKA LATARNIK
Heir

Date: 01.12.01
Eva Maria Latarnik EVA-MARIA LATARNIK
Heir

(Added Page to Combined Declaration and Power of Attorney for Signing by Administrator(trix), Executor(trix) or Legal Representative on Behalf of Deceased or Incapacitated Inventor (37 C.F.R. § 1.42 and 1.43) — page 1 of 3)

Practitioner's Docket No. AP9627

**ADDED PAGE TO COMBINED DECLARATION AND POWER OF
ATTORNEY FOR SIGNATURE BY HEIR (37 C.F.R. § 1.42 AND 1.43)**

2-11 I, Sylvia Monika Latarnik
(type or print name(s) of administrator(trix), executor(trix), legal representative or all heirs)

hereby declare that I am a citizen of Germany ✓

residing at and having a post office address of Römerstraße 7, D-61381 Friedrichsdorf, Germany DEX

and that I am executing and signing the declaration to which this is attached as

(check one):

- ☐ the administrator(trix) of
- ☐ executor(trix) of the last will and testament of
- ☐ legal representative (or heirs) of
- ☐ heir(s) of
- ☒ one of three joint heirs of

Michael Latarnik

Full name of (first, second etc.) deceased or incapacitated inventor

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Country of citizenship of deceased or incapacitated inventor

Römerstraße 7, D-61381 Friedrichsdorf, Germany

Residence of deceased or incapacitated inventor

Römerstraße 7, D-61381 Friedrichsdorf, Germany

Post Office Address of deceased or incapacitated inventor

NOTE: The name of the first, second etc. deceased or incapacitated inventor should preferably also be filled in at the appropriate prior space of the declaration adding the words "deceased-completed on added page" or "incapacitated-completed on added page."

That, upon information and belief, I aver those facts that the inventor is required to state.

Date: 01.12.2001
Christine Latarnik

CHRISTINE LATARNIK
Heir

Date: 01.12.2001
Sylvia Latarnik

SYLVIA MONIKA LATARNIK ✓
Heir

Date: 01.12.01
Eva Maria Latarnik

EVA-MARIA LATARNIK
Heir

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Practitioner's Docket No. AP9627

**ADDED PAGE TO COMBINED DECLARATION AND POWER OF
ATTORNEY FOR SIGNATURE BY HEIR (37 C.F.R. § 1.42 AND 1.43)**

3-11 I, Eva-Maria Latarnik
(type or print name(s) of administrator(trix), executor(trix), legal representative or all heirs)

hereby declare that I am a citizen of Germany ✓

residing at and having a post office address of Alexanderstrasse 31/5, 64283 Darmstadt, Germany DEX

and that I am executing and signing the declaration to which this is attached as

(check one):

- ☐ the administrator(trix) of
- ☐ executor(trix) of the last will and testament of
- ☐ legal representative (or heirs) of
- ☐ heir(s) of
- ☒ one of three joint heirs of

Michael Latarnik

Full name of (first, second etc.) deceased or incapacitated inventor

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Country of citizenship of deceased or incapacitated inventor

Römerstraße 7, D-61381 Friedrichsdorf, Germany

Residence of deceased or incapacitated inventor

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NOTE: The name of the first, second etc. deceased or incapacitated inventor should preferably also be filled in at the appropriate prior space of the declaration adding the words "deceased-completed on added page" or "incapacitated-completed on added page."

That, upon information and belief, I aver those facts that the inventor is required to state.

Date: 01.12.2001
Christine Latarnik CHRISTINE LATARNIK
Heir

Date: 01.12.2001
Sylvia Latarnik SYLVIA MONIKA LATARNIK
Heir

Date: 01.12.01
Eva Maria Latarnik EVA-MARIA LATARNIK
Heir ✓

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